DWS-U1 Form 1D Rev. 6/09

Utah Department of Workforce Services Unemployment Insurance

140 East 300 South
P.O. Box 45288
Salt Lake City, Utah 84145-0288
TEL (801) 526-9235 option 2 • Toll Free 1-800-222-2857 option 2
FAX (801) 526-9236



DOMESTIC EMPLOYMENT STATUS REPORT READ INSTRUCTIONS ON REVERSE SIDE THEN COMPLETE ALL ITEMS

1. Type of Ownership Private	Home College Clubs Sorority Fraternity			
2. Corporation, trade or business nam	e and mailing address for qua	rterly contribution (tax) reports:	s: 4. Federal Employee Identification Number (FEIN):	
			5. County in Utah where	6. Number of permanent
			principal activity is	worksites employing
			located:	domestic help:
3. Telephone Number: ()	Fax Number:	()		
7. Mailing address for Wage and Se Requests (if different from item 2)		ess of principal permanent wor (if different from items 2, 7, or		
10. List sole proprietor, general parti	ners, corporate officers or LL	C members:		
Name	SSN	Title Home	e/Address	Home Phone
				()
				()
				()
11. Describe in detail the type of dor	nestic employment: (see inst	ructions on reverse side)	12 Date of first na	yment of wages in Utah:
11. Describe in detail the type of doi	nestic employment. (see mst	delions on reverse side)	12. Date of first pa	yment of wages in otan.
READ INSTRUCTIONS ON THE RE	VERSE SIDE REFORE CO	MPI FTING ITEMS 13-13F 13	<u> </u>	
Did you acquire the organization, tra				
Type of acquisition: □ Change of	•	reorganization		
☐ Sale, lease or sub-lease ☐ P	urchased assets through coι	ırt □ Other, please explain:		
13a. Name, address and UI account	number (if available) of prev	ious owner (predecessor):		
		#	Date acquired	l
13b. Did you acquire all or a portion	of the predecessor's organiz	ation. trade or business?	90% or more ☐ Less than 90	0%
13c. Did you retain all of the predece	,	·		
13d. Is your predecessor still in busi				
13e. Was predecessor's business cl		Yes □ No Date closed		
·			"NIONIE "	
14. Enter below the amount of wage	Jan. 1 to Mar. 31	Apr. 1 to Jun. 30	Jul. 1 to Sep. 30	Oct. 1 to Dec. 31
Current		7.5		001110200101
Year: Preceding				
Year:				
15. If you have not paid wages, do y	ou expect to in the future?	Yes □ No Estimated date		
16. Are you an employer in a busine	•			
□ Yes □ No	•	ness		
	Address			
	Current Emplo	oyer Identification Number		
Landification the testing of	incalinable !! !			
I certify that the information conta	imea in this report is true a	na correct.		
			()	
Name	•	Title	Telephone Number	Date

INSTRUCTIONS

The Utah Employment Security Act provides that the Department of Workforce Services must determine the status of each business and each person independently established in a trade, occupation, or profession. This report is to be completed immediately and returned to P.O. Box 45288, Salt Lake City, Utah 84145-0288.

All items must be completed. If an item does not apply to your business, enter N/A (Not Applicable).

Except as indicated below, all items are self-explanatory:

ITEM 2: If you have more than one trade name or business name, also list the name or names by which your company is best known by the public.

ITEM 7: Address of agent or office able to provide wage data, weeks of employment and other information about employees separated from your employment, if different from item 2.

ITEM 8: If there is more than one permanent work site, please attach a separate sheet listing the name, address and telephone number of each site.

ITEM 11: Please describe your primary domestic activity, whether you are a private household employing domestic help, child care services, in-home nursing services; a fraternity or sorority or some other type of domestic activity.

ITEM 12: The definition of wages is currently defined by Section 3306(b), of the Internal Revenue Code of 1986, with modifications, subtractions, and adjustments provided in Section 35A-4-208 Subsections (2), (3), and (4), of the Utah Employment Security Act with regard to how the wage base is determined. Wages means all remuneration for employment including commissions, bonuses, **salaries or draws to corporate officers**, tips and the cash value of all remuneration in any medium other than cash.

Wages in Item 12 refers only to wages for employment covered by the Employment Security Act. Under the Act wages paid for services performed by a **sole proprietor's** spouse, parents or children under the age of 21 are not wages for unemployment. Wages paid to the entity owner (i.e. sole proprietor, partners and LLC members) are not wages for unemployment.

ITEM 13: If you acquired (in whole or part) the business activity previously conducted by another entity, or if the business entity has changed (for example, from a proprietorship to a corporation, even if the owners are still principally the same) please complete Items 13-13e. "Acquired" means to have obtained the use of the business or assets through any legal means. It is not necessary to purchase the assets in order to have acquired them, nor is it necessary for your predecessor to have actually owned the business or assets for you to have acquired the business or assets from him. An acquisition can include change in the form of ownership, inheritance, repossession, foreclosure, gift, sale or lease.

ITEM 14: A domestic employer is subject if, during any calendar quarter in the current or preceding calendar year, you paid cash remuneration of \$1,000 or more. In completing item 14, please provide only the amount of cash remuneration and not the value of non cash remuneration such as meals and lodging provided by you, the employer. (The non cash remuneration may be deemed a wage when filing Employer's Quarterly Contribution Report, but is not considered when calculating whether you as an employer have reached \$1,000 in a calendar quarter.)

If additional information is needed, please call 801-526-9235 option 2 or 1-800-222-2857 option 2 (Instate toll free number). Fax 801-526-9236.